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TO: Examiner Bruce D. Hissong, Ph.D. FROM: Christopher Eisenschenk, Ph.D.

COMPANY: U.S. Patent Office

DATE: June 14, 2006

FAX NO.: 1-571-273-8300

NO. OF PAGES: 16
(INCLUDING COVER SHEET)

SUBJECT/MESSAGE:

Re: U.S. Patent Application Docket No. ARS-103
CHEMOKINES MUTANTS HAVING IMPROVED ORAL
BIOAVAILABILITY
(Poundfoot, Kosco-Vilbois, Wells)
Serial No. 10/510,014; filed September 30, 2004

Attachments: Supplemental Amendment Under 37 C.F.R. § 1.111 (14 pages)
Amendment Transmittal Letter (1 page)

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AMENDMENT TRANSMITTAL LETTER			ATTORNEY'S DOCKET NO. ARS-103
SERIAL NO. 10/510,014	FILING DATE September 30, 2004	EXAMINER Bruce D. Hissong, Ph.D.	GROUP ART UNIT 1646
INVENTION Chemokines Mutants Having Improved Oral Bioavailability			RECEIVED CENTRAL FAX CENTER

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TO THE COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.27 has been established by a verified statement previously submitted.
- ☐ Applicants claim small entity status.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.
- ☒ The fee has been calculated as shown below:

(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	* 21	MINUS	** 20		1	\$25	\$0.00	\$50	\$50.00
INDEP.	* 3	MINUS	*** 4		0	\$100	\$0.00	\$200	\$ 0.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\$180	\$0.00	\$360	\$ 0.00
						Total addit. Fee	\$0.00	Total addit. fee	\$50.00

OR

OR

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the Highest No. Previously Paid For IN THIS SPACE is less than 20, enter "20."

*** If the Highest No. Previously Paid For IN THIS SPACE is less than 3, enter "3."

The Highest No. Previously Paid For (Total or Indep.) is the highest number found in the appropriate box in Col. 1.

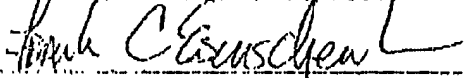
- ☒ Please charge my Deposit Account No. 19-0065 in the amount of \$ 50.00.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0065.
- ☒ Any additional filing fees required under 37 CFR 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

June 14, 2006

(date)

Frank C. Eisenschenk
 Frank C. Eisenschenk, Ph.D., Regl. No. 45,332

I hereby certify that this correspondence is being
facsimile transmitted to the United States Patent
and Trademark Office on June 14, 2006.


Frank C. Bissenschek, Ph.D., Patent Attorney

SUPPLEMENTAL AMENDMENT UNDER
37 C.F.R. § 1.111

Examining Group 1646

Patent Application

Docket No. ARS-103

Serial No. 10/510,014

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Bruce D. Hissong, Ph.D.
Art Unit : 1646
Applicants : Amanda Proudfoot, Maria Kosco-Vilbois, Timothy Wells
Serial No. : 10/510,014
Filed : September 30, 2004
Conf. No. : 4504
For : Chemokines Mutants Having Improved Oral Bioavailability

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

SUPPLEMENTAL AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

In response to the Office Action dated November 3, 2005 and the Notice of Non-Compliant
Amendment dated May 15, 2006, please amend the above-identified patent application as follows:

06/15/2006 TL0111 00000057 190065 10510014
01 FC:1202 50.00 DA

J:\ARS\103\Amend-Resp\Suppl.Amend\DN1361